



PTO/SB/22 (06-03)

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## PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket No. (Optional)  
JJJ-P06-504

In re Application of Rueger et al.	
Application Number 08/937756	Filed September 25, 1997
For: MORPHOGEN-INDUCED NERVE REGENERATION AND REPAIR	
Art Unit 1647	Examiner S. Turner

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- |   |           |
|---|-----------|
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))   | \$ 110.00 |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))   | \$ _____  |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3))   | \$ _____  |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))  | \$ _____  |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))  | \$ _____  |
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ 55.00 |           |
| <input type="checkbox"/> A check in the amount of the fee is enclosed.  |           |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.   |           |
| <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.   |           |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 18-1945                |           |

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TECH CENTER 16/ART DIVISION

I have enclosed a duplicate copy of this sheet.

- I am the  applicant/inventor.  
 assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  
 attorney or agent of record. Registration Number P55,661  
 attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a)

January 22, 2004  
DateErika Takeuchi  
Typed or printed name(212) 497-3625  
Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below

 Total of 1 forms are submitted.

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. ER 986434730 US, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: January 22, 2004

Signature:

(Linda Blake)